

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/805,099</td> </tr> <tr> <td>Filing Date</td> <td>March 19, 2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Chunhui XU</td> </tr> <tr> <td>Title</td> <td>Process for Making Transp...</td> </tr> <tr> <td>Art Unit</td> <td>1632</td> </tr> <tr> <td>Examiner Name</td> <td>Marcia Stephens NOBLE</td> </tr> <tr> <td>Attorney Docket Number</td> <td>099/004P</td> </tr> </table>	Application Number	10/805,099	Filing Date	March 19, 2004	First Named Inventor	Chunhui XU	Title	Process for Making Transp...	Art Unit	1632	Examiner Name	Marcia Stephens NOBLE	Attorney Docket Number	099/004P
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Attorney Docket Number	099/004P														

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR

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I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____.

SIGNATURE of Applicant or Assignee of Record

Signature

Date

August 19, 2009

Name

David J. Earp, J.D., Ph.D.

Telephone

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Title and Company

Chief Patent Counsel, Sr. VP Business Development

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

☒ *Total of 2 forms are submitted.

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